

**United States Bankruptcy Court
Northern District of Georgia**

In re Chandra Kaye Allen-Campbell

Debtor(s)

Case No. 20-67115

Chapter 13

AMENDMENT COVER SHEET

Amendment(s) to the following petition, list(s), schedule(s) or statement(s) are transmitted herewith:
Amended Schedules I & J and Summary of Assets and Liabilities

NOTICE OF AMENDMENT(S) TO AFFECTED PARTIES

Pursuant to Federal Rule of Bankruptcy Procedure 1009(a), I certify that notice of the filing of the amendment(s) listed above has been given this date to any and all entities affected by the amendment as follows:

Date: August 27, 2020

/s/ ChaRon A. Ballard

ChaRon A. Ballard 251011

Attorney for Debtor(s)

The Ballard Law Group, P.C

3664 Club Drive

Suite 203 A

Lawrenceville, GA 30044

404-220-9906 Fax:404-220-9907

theballardlawgroup@gmail.com

Fill in this information to identify your case:

Debtor 1 Chandra Kaye Allen-Campbell

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIA

Case number 20-67115
(If known)

Check if this is:

- ☒ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed	<input type="checkbox"/> Employed <input type="checkbox"/> Not employed
	Occupation	<u>Teacher</u>	
Include part-time, seasonal, or self-employed work.	Employer's name	<u>ECDC Headstart</u>	
	Employer's address	<u>100 Edgwood Ave Ste 1230 Atlanta, GA 30303</u>	
Occupation may include student or homemaker, if it applies.	How long employed there?	<u>27 yrs</u>	

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	\$ <u>5,033.00</u>	\$ <u>N/A</u>
3. Estimate and list monthly overtime pay.	+\$ <u>0.00</u>	+\$ <u>N/A</u>
4. Calculate gross income. Add line 2 + line 3.	\$ <u>5,033.00</u>	\$ <u>N/A</u>

Debtor 1 Chandra Kaye Allen-Campbell

Case number (if known) 20-67115

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here	4. \$ 5,033.00	\$ N/A
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$ 985.00	\$ N/A
5b. Mandatory contributions for retirement plans	5b. \$ 0.00	\$ N/A
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$ N/A
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$ N/A
5e. Insurance	5e. \$ 228.00	\$ N/A
5f. Domestic support obligations	5f. \$ 0.00	\$ N/A
5g. Union dues	5g. \$ 24.00	\$ N/A
5h. Other deductions. Specify: <u>Disability</u>	5h. \$ 51.00	\$ N/A
<u>Life Ins</u>	\$ 70.00	\$ N/A
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. \$ 1,358.00	\$ N/A
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 3,675.00	\$ N/A
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 0.00	\$ N/A
8b. Interest and dividends	8b. \$ 0.00	\$ N/A
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 0.00	\$ N/A
8d. Unemployment compensation	8d. \$ 0.00	\$ N/A
8e. Social Security	8e. \$ 0.00	\$ N/A
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f. \$ 0.00	\$ N/A
8g. Pension or retirement income	8g. \$ 0.00	\$ N/A
8h. Other monthly income. Specify:	8h. \$ 0.00	\$ N/A
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9. \$ 0.00	\$ N/A
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 3,675.00 + \$ N/A = \$ 3,675.00	
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:		
	11. +\$	0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies	12. \$	3,675.00
Combined monthly income		
13. Do you expect an increase or decrease within the year after you file this form?		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes. Explain: _____		

Fill in this information to identify your case:

Debtor 1 Chandra Kaye Allen-Campbell

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIA

Case number 20-67115
(If known)

Check if this is:

- ☒ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY _____

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

☒ No. Go to line 2.

☐ Yes. Does Debtor 2 live in a separate household?

☐ No

☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents? ☐ No

Do not list Debtor 1 and Debtor 2.

☒ Yes. Fill out this information for each dependent.....

Do not state the dependents names.

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

son

19

☐ No

☒ Yes

☐ No

☐ Yes

☐ No

☐ Yes

☐ No

☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents? ☒ No ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 740.00

If not included in line 4:

4a. Real estate taxes

4a. \$ 0.00

4b. Property, homeowner's, or renter's insurance

4b. \$ 0.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 0.00

4d. Homeowner's association or condominium dues

4d. \$ 9.00

5. Additional mortgage payments for your residence, such as home equity loans

5. \$ 0.00

Debtor 1 **Chandra Kaye Allen-Campbell**

Case number (if known) **20-67115**

6. Utilities:

6a. Electricity, heat, natural gas	6a. \$	210.00
6b. Water, sewer, garbage collection	6b. \$	75.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	151.00
6d. Other. Specify: _____	6d. \$	0.00

7. Food and housekeeping supplies

7. \$ **535.00**

8. Childcare and children's education costs

8. \$ **0.00**

9. Clothing, laundry, and dry cleaning

9. \$ **65.00**

10. Personal care products and services

10. \$ **65.00**

11. Medical and dental expenses

11. \$ **0.00**

12. Transportation. Include gas, maintenance, bus or train fare.
Do not include car payments.

12. \$ **275.00**

13. Entertainment, clubs, recreation, newspapers, magazines, and books

13. \$ **0.00**

14. Charitable contributions and religious donations

14. \$ **0.00**

15. Insurance.

Do not include insurance deducted from your pay or included in lines 4 or 20.

15a. Life insurance	15a. \$	15.00
15b. Health insurance	15b. \$	0.00
15c. Vehicle insurance	15c. \$	390.00
15d. Other insurance. Specify: _____	15d. \$	0.00

16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.
Specify: _____

16. \$ **0.00**

17. Installment or lease payments:

17a. Car payments for Vehicle 1	17a. \$	0.00
17b. Car payments for Vehicle 2	17b. \$	0.00
17c. Other. Specify: _____	17c. \$	0.00
17d. Other. Specify: _____	17d. \$	0.00

18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).

18. \$ **0.00**

19. Other payments you make to support others who do not live with you.
Specify: _____

19. \$ **0.00**

20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.

20a. Mortgages on other property	20a. \$	0.00
20b. Real estate taxes	20b. \$	0.00
20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e. Homeowner's association or condominium dues	20e. \$	0.00

21. Other: Specify: _____

21. +\$ **0.00**

22. Calculate your monthly expenses

22a. Add lines 4 through 21.
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2
22c. Add line 22a and 22b. The result is your monthly expenses.

\$	2,530.00
\$	
\$	2,530.00

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	3,675.00
23b. Copy your monthly expenses from line 22c above.	23b. -\$	2,530.00

23c. Subtract your monthly expenses from your monthly income.
The result is your *monthly net income*.

23c. \$ **1,145.00**

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes.

Explain here: _____

Fill in this information to identify your case:

Debtor 1 **Chandra Kaye Allen-Campbell**
First Name Middle Name Last Name

Debtor 2
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **NORTHERN DISTRICT OF GEORGIA**

Case number **20-67115**
(if known)

☒ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

		Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)		
1a. Copy line 55, Total real estate, from Schedule A/B.....	\$	153,849.00
1b. Copy line 62, Total personal property, from Schedule A/B.....	\$	11,787.00
1c. Copy line 63, Total of all property on Schedule A/B.....	\$	165,636.00

Part 2: Summarize Your Liabilities

		Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)		
2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> ...	\$	131,929.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)		
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	\$	0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	\$	112,683.00
Your total liabilities		\$ 244,612.00

Part 3: Summarize Your Income and Expenses

4. Schedule I: Your Income (Official Form 106I)		
Copy your combined monthly income from line 12 of <i>Schedule I</i>	\$	3,675.00
5. Schedule J: Your Expenses (Official Form 106J)		
Copy your monthly expenses from line 22c of <i>Schedule J</i>	\$	2,530.00

Part 4: Answer These Questions for Administrative and Statistical Records

6. **Are you filing for bankruptcy under Chapters 7, 11, or 13?**
- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- ☒ Yes
7. **What kind of debt do you have?**
- ☒ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Debtor 1 **Chandra Kaye Allen-Campbell**

Case number (if known) **20-67115**

8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ **5,033.00**

9. **Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

From Part 4 on Schedule E/F, copy the following:	Total claim
9a. Domestic support obligations (Copy line 6a.)	\$ 0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ 0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ 0.00
9d. Student loans. (Copy line 6f.)	\$ 86,700.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ 0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$ 0.00
9g. Total. Add lines 9a through 9f.	\$ 86,700.00

Fill in this information to identify your case:

Debtor 1 Chandra Kaye Allen-Campbell
First Name Middle Name Last Name

Debtor 2
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIA

Case number 20-67115
(if known)

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

 Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person _____ Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Chandra Kaye Allen-Campbell
Chandra Kaye Allen-Campbell
Signature of Debtor 1

X _____
Signature of Debtor 2

Date August 27, 2020

Date _____

**United States Bankruptcy Court
Northern District of Georgia**

In re Chandra Kaye Allen-Campbell

Debtor(s)

Case No. 20-67115-LRC

Chapter 13

CERTIFICATE OF SERVICE

I hereby certify that on August 27, 2020, 2020, a copy of Amended Schedules I & J and Summary of Assets and Liabilities was served electronically or by regular United States mail to all interested parties, the Trustee and all creditors listed attached.

All Attached

/s/ ChaRon A. Ballard

ChaRon A. Ballard 251011
The Ballard Law Group, P.C
3664 Club Drive
Suite 203 A
Lawrenceville, GA 30044
404-220-9906 Fax: 404-220-9907
theballardlawgroup@gmail.com

abel Matrix for local noticing 13E-1 ase 20-67115-lrc orthern District of Georgia lanta ed Aug 26 12:44:57 EDT 2020	Chandra Raye Allen Campbell 2834 Ward Lake Way Ellenwood, GA 30294-1796	(p)AMERICREDIT FINANCIAL SERVICES DBA GM FIN PO BOX 183853 ARLINGTON TX 76096-3853
neriCredit/GM Financial o Box 183853 rlington, TX 76096-3853	American First Finance c/o Becket and Lee LLP PO Box 3002 Malvern PA 19355-0702	Americredit Financial Services, Inc. Dba GM P.O Box 183853 Arlington, TX 76096-3853
shro Lifestyle /o Creditors Bankruptcy Service .O. Box 800849 allas, TX 75380-0849	Cha'Ron A. Ballard The Ballard Law Group, P.C. Suite 203 A 3664 Club Drive Lawrenceville, GA 30044-2995	COMCAST PO BOX 1931 Burlingame, CA 94011-1931
apital One o Box 30285 alt Lake City, UT 84130-0285	Capital One Auto Finance Attn: Bankruptcy Dept Po Box 30258 Salt Lake City, UT 84130-0258	Capital One Auto Finance, a division of Cap 4515 N Santa Fe Ave. Dept. APS Oklahoma City, OK 73118-7901
omcast DB 530099 lanta, GA 30353-0099	Melissa J. Davey Melissa J. Davey, Standing Ch 13 Trustee Suite 200 260 Peachtree Street, NW Atlanta, GA 30303-1236	Dept Of Ed/Navient Attn: Claims Dept Po Box 9400 Wilkes Barr, PA 18773-9400
ept Of Ed/Navient o Box 9635 ilkes Barre, PA 18773-9635	Fingerhut 6250 Ridgewood Rd St Cloud, MN 56303-0820	Fst Premier 601 S Minneapolis Ave Sioux Falls, SD 57104
orgia Department of Labor 48 Andrew Young Int'l Blvd, uite 826 lanta, GA 30303-1751	(p)GEORGIA DEPARTMENT OF REVENUE COMPLIANCE DIVISION ARCS BANKRUPTCY 1800 CENTURY BLVD NE SUITE 9100 ATLANTA GA 30345-3202	Georgia Dept. of Labor Suite 826 148 Andrew Young Inter. Blvd., NE Atlanta GA 30303-1751
orgia Dept. of Labor uite 910 48 Andrew Young Inter. Blvd., NE lanta GA 30303-1751	Ginny's c/o Creditors Bankruptcy Service P.O. Box 800849 Dallas, TX 75380-0849	(p)INTERNAL REVENUE SERVICE CENTRALIZED INSOLVENCY OPERATIONS PO BOX 7346 PHILADELPHIA PA 19101-7346
. Jordan /o Creditors Bankruptcy Service .O. Box 800849 allas, TX 75380-0849	Kaiser Permanente Nine Piedmont Center 3495 Piedmont Rd, NE Atlanta, GA 30305-1729	Lowe's P.O.Box 530970 Atlanta, GA 30353-0970
ERRICK BANK esurgent Capital Services o Box 10368 reenville, SC 29603-0368	Merrick Bank/Geico Card Po Box 23356 Pittsburg, PA 15222-6356	Monroe & Main c/o Creditors Bankruptcy Service P.O. Box 800849 Dallas, TX 75380-0849

Montgomery Ward
 c/o Creditors Bankruptcy Service
 P.O. Box 800849
 Dallas, TX 75380-0849

(p)NATIONWIDE RECOVERY SERVICE
 545 W INMAN ST
 CLEVELAND TN 37311-1768

Piedmont Hospital
 P.O.Box 102570
 Atlanta, GA 30368-2570

(p)PORTFOLIO RECOVERY ASSOCIATES LLC
 P.O. BOX 41067
 NORFOLK VA 23541-1067

Premier Bankcard, LLC
 Jefferson Capital Systems LLC Assignee
 P.O. Box 7999
 Saint Cloud Mn 56302-7999

Quantum3 Group LLC as agent for Sadino Fund
 P.O. Box 788
 Kirkland, WA 98083-0788

Andrique Robert
 334 Ward Lake Way
 Ellenwood, GA 30294-1796

Sallie Mae
 11100 Usa Pkwy
 Fishers, IN 46037-9203

Sallie Mae
 Attn: Navient
 P.O. Box 9500
 Wilkes-Barr, PA 18773-9500

Coretia Lashawn Scruggs
 Napier Pendergast & Hasty
 11 Perimeter Center Parkway, N.E.
 Suite 300
 Atlanta, GA 30346-1305

Security Fin
 SFC Centralized Bankruptcy
 P.O. Box 1893
 Spartanburg, SC 29304-1893

Security Finance Corporation
 P.O. Box 1893
 Spartanburg, SC 29304-1893

Napier Pendergast & Hasty, LLP
 372 Woodcock Boulevard
 Suite 100
 Atlanta, GA 30341-4015

Stoneberry
 c/o Creditors Bankruptcy Service
 P.O. Box 800849
 Dallas, TX 75380-0849

United States Attorney
 Northern District of Georgia
 75 Ted Turner Drive SW, Suite 600
 Atlanta GA 30303-3309

Ward Lake Estates HOA
 P.O. Box 157
 Ellenwood, GA 30294-0157

Wells Fargo Bank, N.A.
 Default Document Processing
 MAC # N9286-01Y
 1000 Blue Gentian Road
 Eagan, MN 55121-7700

(p)WELLS FARGO BANK NA
 WELLS FARGO HOME MORTGAGE AMERICAS SERVICE
 ATTN BANKRUPTCY DEPT MAC X7801-014
 3476 STATEVIEW BLVD
 FORT MILL SC 29715-7203

The preferred mailing address (p) above has been substituted for the following entity/entities as so specified by said entity/entities in a Notice of Address filed pursuant to 11 U.S.C. 342(f) and Fed.R.Bank.P. 2002 (g) (4).

MeriCredit Financial Services, Inc.
 c/o GM Financial
 P.O. Box 183853
 Arlington, TX 76096

Georgia Department of Revenue
 Bankruptcy Section
 1800 Century Blvd, Suite 17200
 Atlanta, GA 30345

Internal Revenue Service
 Bankruptcy Section
 P.O.Box 21126
 Philadelphia, PA 19114

Nationwide Recovery Service
 P.O. Box 8005
 Cleveland, TN 37320

Portfolio Recovery Associates, LLC
 POB 41067
 Norfolk VA 23541

Wells Fargo Home Mortgage
 8480 Stagecoach Cir
 Frederick, MD 21701

1) Capital One Auto Finance, a division of Ca
515 N Santa Fe Ave. Dept. APS
Oklahoma City, OK 73118-7901

(u) WELLS FARGO BANK, N.A.

End of Label Matrix	
Mailable recipients	47
Bypassed recipients	2
Total	49